105TH CONGRESS 2D SESSION

S. 2254

To provide for the establishment of an assistance program for health insurance consumers.

IN THE SENATE OF THE UNITED STATES

June 26, 1998

Mr. Reed introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

A BILL

To provide for the establishment of an assistance program for health insurance consumers.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "Health Care Consumer
- 5 Assistance Act".
- 6 SEC. 2. GRANTS.
- 7 (a) In General.—The Secretary of Health and
- 8 Human Services (referred to in this Act as the "Sec-
- 9 retary") shall award grants to States to enable such
- 10 States to enter into contracts for the establishment of con-

- 1 sumer assistance programs designed to assist consumers
- 2 of health insurance in understanding their rights, respon-
- 3 sibilities and choices among health insurance products.
- 4 (b) Eligibility.—To be eligible to receive a grant
- 5 under this section a State shall prepare and submit to the
- 6 Secretary an application at such time, in such manner,
- 7 and containing such information as the Secretary may re-
- 8 quire, including a State plan that describes—
- 9 (1) the manner in which the State will solicit
- proposals for, and enter into a contract with, an en-
- 11 tity eligible under section 3 to serve as the health in-
- surance consumer office for the State; and
- 13 (2) the manner in which the State will ensure
- that advice and assistance services for health insur-
- ance consumers are coordinated through the office
- described in paragraph (1).
- 17 (c) Amount of Grant.—
- 18 (1) In General.—From amounts appropriated
- under section 5 for a fiscal year, the Secretary shall
- award a grant to a State in an amount that bears
- 21 the same ratio to such amounts as the number of in-
- dividuals within the State covered under a health in-
- surance plan (as determined by the Secretary) bears
- to the total number of individuals covered under a
- health insurance plan in all States (as determined by

- the Secretary). Any amounts provided to a State under this section that are not used by the State shall be remitted to the Secretary and reallocated in accordance with this paragraph.
- 5 (2) MINIMUM AMOUNT.—In no case shall the 6 amount provided to a State under a grant under this 7 section for a fiscal year be less than an amount 8 equal to .5 percent of the amount appropriated for 9 such fiscal year under section 5.

10 SEC. 3. ELIGIBILITY OF STATE ENTITIES.

- To be eligible to enter into a contract with a State
- 12 and operate as the health insurance consumer office for
- 13 the State under this Act, an entity shall—
- 14 (1) be an independent, nonprofit entity with 15 demonstrated experience in serving the needs of 16 health care consumers (particularly low income and 17 other consumers who are most in need of consumer
- (2) prepare and submit to the State a proposalcontaining such information as the State may re-
- 21 quire;

assistance);

18

- 22 (3) demonstrate that the entity has the tech-23 nical, organizational, and professional capacity to 24 operate the health insurance consumer office within
- 25 the State;

- 1 (4) provide assurances that the entity has no 2 real or perceived conflict of interest in providing ad-3 vice and assistance to consumers regarding health insurance and that the entity is independent of 5 health insurance plans, companies, providers, payers, 6 and regulators of care; and
- 7 (5) demonstrate that, using assistance provided 8 by the State, the entity has the capacity to provide 9 assistance and advice throughout the State to public 10 and private health insurance consumers regardless 11 of the source of coverage.

12 SEC. 4. USE OF FUNDS.

13 (a) By State.—A State shall use amounts received 14 under a grant under this Act to enter into a contract de-15 scribed in section 2(a) to provide funds for the establishment and operation of a health insurance consumer office. 16

17 (b) By Entity.—

- 18 (1) IN GENERAL.—An entity that enters into a 19 contract with a State under this Act shall use 20 amounts received under the contract to establish and operate a health insurance consumer office.
 - (2) Noncompliance.—If the State fails to enter into a contract under subsection (a), the Secretary shall withhold amounts to be provided to the State under this Act and use such amounts to enter

21

22

23

24

25

1	into the contract described in paragraph (1) for the
2	State.
3	(c) ACTIVITIES OF OFFICE.—A health insurance con-
4	sumer office established under this Act shall—
5	(1) provide information to health insurance con-
6	sumers within the State relating to choice of health
7	insurance products and the rights and responsibil-
8	ities of consumers and insurers under such products
9	(2) operate toll-free telephone hotlines to re-
10	spond to requests for information, advice or assist-
11	ance concerning health insurance in a timely and ef-
12	ficient manner;
13	(3) produce and disseminate educational mate-
14	rials concerning health insurance consumer and pa-
15	tient rights;
16	(4) provide assistance and representation (in
17	nonlitigative settings) to individuals who desire to
18	appeal the denial, termination, or reduction of health
19	care services, or the refusal to pay for such services
20	under a health insurance plan;
21	(5) make referrals to appropriate private and
22	public individuals or entities so that inquiries, prob-
23	lems, and grievances with respect to health insur-

ance can be handled promptly and efficiently; and

24

- 1 (6) collect data concerning inquiries, problems,
- 2 and grievances handled by the office and disseminate
- a compilation of such information to employers,
- 4 health plans, health insurers, regulatory agencies,
- 5 and the general public.
- 6 (d) AVAILABILITY OF SERVICES.—The office shall
- 7 not discriminate in the provision of services regardless of
- 8 the source of the individual's health insurance coverage
- 9 or prospective coverage, including individuals covered
- 10 under employer-provided insurance, self-funded plans, the
- 11 medicare or medicaid programs under title XVIII or XIX
- 12 of the Social Security Act (42 U.S.C. 1395 and 1396 et
- 13 seq.), or under any other Federal or State health care pro-
- 14 gram.
- 15 (e) Subcontracts.—An office established under
- 16 this section may carry out activities and provide services
- 17 through contracts entered into with 1 or more nonprofit
- 18 entities so long as the office can demonstrate that all of
- 19 the requirements of this Act are met by the office.
- 20 (f) Training.—
- 21 (1) In General.—An office established under
- this section shall ensure that personnel employed by
- 23 the office possess the skills, expertise, and informa-
- 24 tion necessary to provide the services described in
- subsection (c).

- 1 (2) Contracts.—To meet the requirement of 2 paragraph (1), an office may enter into contracts 3 with 1 or more nonprofit entities for the training 4 (both through technical and educational assistance) 5 of personnel and volunteers. To be eligible to receive 6 a contract under this paragraph, an entity shall be 7 independent of health insurance plans, companies, 8 providers, payers, and regulators of care.
- 9 (3) LIMITATION.—Not to exceed 7 percent of 10 the amount awarded to an entity under a contract 11 under subsection (a) for a fiscal year may be used 12 for the provision of training under this section.
- 13 (g) Administrative Costs.—Not to exceed 1 per-14 cent of the amount of a block grant awarded to the State 15 under subsection (a) for a fiscal year may be used for ad-16 ministrative expenses by the State.
- (h) TERM.—A contract entered into under subsection(a) shall be for a term of 3 years.

19 SEC. 5. AUTHORIZATION OF APPROPRIATIONS.

There are authorized to be appropriated such sums as may be necessary to carry out this Act.